

PART B - FEE(S) TRANSMITTAL

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7590

03/08/2004

Michael I Falkoff
 Nutter McClennen & Fish
 One International Place
 Boston, MA 02110-2699

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

William C. Geary III	(Depositor's name)
	(Signature)
June 2, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/674,137	12/04/2000	Dominick Layfield	22727-56	2839

TITLE OF INVENTION: RADIATION HANDLING SYSTEM AND SET

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	06/08/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SNAY, JEFFREY R	1743	422-055000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

The General Hospital

Boston, MA

Corporation d/b/a Massachusetts General Hospital

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee
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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

June 2, 2004

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06/08/2004 MBERHE1 00000076 09674137

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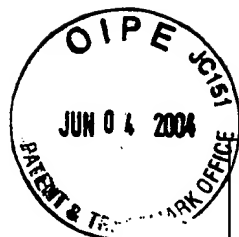
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2004 <small>Effective 10/01/2003, Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	09/674,137
		Filing Date	April 26, 1999
		First Named Inventor	Dominick Layfield
		Examiner Name	J. R. Snay
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1743
TOTAL AMOUNT OF PAYMENT		(\$)	665.00
		Attorney Docket No.	022727-0056

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																																																																																																																																	
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unavoidable</td><td></td></tr><tr><td>1453</td><td>2453</td><td>1,330</td><td>665</td><td>Petition to revive - unintentional</td><td></td></tr><tr><td>1501</td><td>2501</td><td>1,330</td><td>665</td><td>Utility issue fee (or reissue)</td><td>665.00</td></tr><tr><td>1502</td><td>2502</td><td>480</td><td>240</td><td>Design issue fee</td><td></td></tr><tr><td>1503</td><td>2503</td><td>640</td><td>320</td><td>Plant issue fee</td><td></td></tr><tr><td>1460</td><td>2460</td><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>1807</td><td>2807</td><td>50</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr><tr><td>1806</td><td>2806</td><td>180</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr><tr><td>8021</td><td>8021</td><td>40</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr><tr><td>1809</td><td>2809</td><td>770</td><td>385</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr><tr><td>1810</td><td>2810</td><td>770</td><td>385</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr><tr><td>1801</td><td>2801</td><td>770</td><td>385</td><td>Request for Continued Examination (RCE)</td><td></td></tr><tr><td>1802</td><td>2802</td><td>900</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr><tr><td colspan="5">Other fee (specify)</td><td></td></tr><tr><td colspan="5">*Reduced by Basic Filing Fee Paid</td><td></td></tr><tr><td colspan="5">SUBTOTAL (3)</td><td>(\$) 665.00</td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid	1051	2051	130	65	Surcharge - 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SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	William C. Geary III	Registration No. (Attorney/Agent)	31,359
Signature		Telephone	(617) 439-2766
		Date	June 2, 2004

Fee Transmittal	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop, Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: June 2, 2004	Signature: (William C. Geary III)



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Dated: June 2, 2004

Signature: 

(William C. Geary III)

Docket No.: 022727-0056
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Dominick Layfield et al.

Application No.: 09/674,137

Group Art Unit: 1743

Filed: April 26, 1999

Examiner: J. R. Snay

For: RADIATION HANDLING SYSTEM AND SET

TRANSMITTAL LETTER

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

1. Fee Transmittal (1 page), and
2. PTO Form PTOL-85.

Our check in the amount of \$665.00 covering the required fees is enclosed. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 141449, under Order No. 022727-0056. A duplicate copy of this paper is enclosed.

Dated: June 2, 2004

Respectfully submitted,

By 

William C. Geary III
Registration No.: 31,359
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Attorney for Applicant